MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. 10/588055 **FILING DATE**

APPLICANT(S)

CLAIMS

#	AS FILED IND.	AS FILED DEP.	AFTER 1st AMENDMENT IND.	AFTER 1st AMENDMENT DEP.	AFTER 2nd AMENDMENT IND.	AFTER 2nd AMENDMENT DEP.	#	AS FILED IND.	AS FILED DEP.	AFTER 1st AMENDMENT IND.	AFTER 1st AMENDMENT DEP.	AFTER 2nd AMENDMENT IND.	AFTER 2nd AMENDMENT DEP.
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49							99						
50							100						
TOTAL IND.		↓	2	↓		↓	TOTAL IND.		↓		↓		↓
TOTAL DEP.		←	15	←		←	TOTAL DEP.		←		←		←
TOTAL CLAIMS			17				TOTAL CLAIMS						

PTO - 1360 (REV. 11/04)

U.S. DEPARTMENT of COMMERCE